



# Trinity Canton Church

P.O. Box 2025; Manhattan, Kansas 66505

## AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER

I (We) hereby authorize Trinity Canton Church of Manhattan, Kansas, to debit my (our) bank account to receive my (our) Regular Giving.

My (Our) Name \_\_\_\_\_

My (Our) Bank Name \_\_\_\_\_

\*Bank ABA (routing) # \_\_\_\_\_ \*Account # \_\_\_\_\_

Account Type:  Checking  Savings Deduction Amount \$ \_\_\_\_\_

Deduction Frequency:  Weekly (debited on Wednesday of each week)  
 Monthly - check one of the following:  5<sup>th</sup> of each month  
 20<sup>th</sup> of each month

My (Our) Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this signed, original agreement to Trinity Canton Church.

- I (we) would like a copy of this signed agreement
- I (w) would like to terminate my (our) electronic funds transfer

This authority is to remain in full force and effect until the Trinity Canton Church has received written notification from me (or either of us) of its termination.

\*Use the example to the right to locate, on a check, your Bank Routing Number and Account Number; you can also contact your bank for this information.



Routing Number

Account Number